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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/865,441	05/29/2001	Doug Grumann	10002687-1	3760
<div>22879      7590      04/27/2007</div> <div>HEWLETT PACKARD COMPANY P O BOX 272400, 3404 E. HARMONY ROAD INTELLECTUAL PROPERTY ADMINISTRATION FORT COLLINS, CO 80527-2400</div>				
			<div>EXAMINER</div> <div>YIGDALL, MICHAEL J</div>	
			<div>ART UNIT</div> <div>2192</div>	<div>PAPER NUMBER</div>
			<div>MAIL DATE</div> <div>04/27/2007</div>	<div>DELIVERY MODE</div> <div>PAPER</div>

Please find below and/or attached an Office communication concerning this application or proceeding.

<b>Interview Summary</b>	<b>Application No.</b> 09/865,441	<b>Applicant(s)</b> GRUMANN, DOUG	
	<b>Examiner</b> Michael J. Yigdall	<b>Art Unit</b> 2192	

All participants (applicant, applicant's representative, PTO personnel):

(1) Michael J. Yigdall. (3)\_\_\_\_\_

(2) Kelly Lee Kasha (Reg. No. 47,743). (4)\_\_\_\_\_

Date of Interview: 23 April 2007.

Type: a) ☒ Telephonic b) ☐ Video Conference  
c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☒ No.  
If Yes, brief description: \_\_\_\_\_

Claim(s) discussed: 1 and 12.

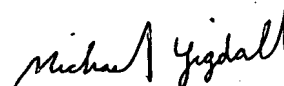
Identification of prior art discussed: Barritz, Kutcher.

Agreement with respect to the claims f) ☒ was reached. g) ☐ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: See Continuation Sheet.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.



Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required

Continuation of Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments:

Agreed that if the claims were somehow amended to limit the meaning of "configuring" the performance management tools to changing the execution and/or behavior of the tools in a manner that differs from the "configuring" of Kutcher, that the claims would then likely distinguish over the references as applied. Also agreed that the feature of "discovering hardware devices," such as reflected in the proposed amendment to claim 12, would likely distinguish over the references as applied. The examiner asked that Applicant's representative indicate where any such amendments to the claims are supported in the specification. Applicant's representative plans to file a request for continued examination in response to the last Office action.

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## Applicant Initiated Interview Request Form

Application No.: 09/865441 First Named Applicant: Grumman  
 Examiner: Yigdel Art Unit: 2192 Status of Application: Pending

## Tentative Participants:

(1) Kelly Kasha (2) \_\_\_\_\_  
 (3) \_\_\_\_\_ (4) \_\_\_\_\_

Proposed Date of Interview: April 23 Proposed Time: 2 (AM/PM)

## Type of Interview Requested:

(1) ☒ Telephonic (2) ☐ Personal (3) ☐ Video Conference

Exhibit To Be Shown or Demonstrated: ☐ YES ☐ NO

If yes, provide brief description: \_\_\_\_\_

## Issues To Be Discussed

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>103 Rej.</u>	<u>1</u>	<u>Kutcher</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Continuation Sheet Attached

## Brief Description of Arguments to be Presented:

Kutcher does not disclose or suggest changing the tools' configuration, i.e. changing the  
execution of the tools to match the system against which the tools are executed  
See Pages 6-7 of the Draft response

An interview was conducted on the above-identified application on \_\_\_\_\_.

## NOTE:

This form should be completed by applicant and submitted to the examiner in advance of the interview (see MPEP § 713.01).

This application will not be delayed from issue because of applicant's failure to submit a written record of this interview. Therefore, applicant is advised to file a statement of the substance of this interview (37 CFR 1.133(b)) as soon as possible.

\_\_\_\_\_  
 (Applicant/Applicant's Representative Signature)

\_\_\_\_\_  
 (Examiner/SPE Signature)

This collection of information is required by 37 CFR 1.133. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.